# Common pregnancy related health problems among pregnant women in Awka south L.GA. of Anambra State Nigeria

Nnaemezie, Nkiru Onyinyechukwu<sup>1</sup>, Ibe Ijeoma M.A<sup>2</sup>, Chukwuebuka Nnagozie Bosah<sup>3</sup>, Ifejirika Chinenye C.<sup>4</sup>

<sup>1, 2, 4</sup>Department of Health Promotion and Public Health Education, Faculty of Education Nnamdi Azikiwe University, Awka, University of Nigeria Nsukka

DOI: https://doi.org/10.5281/zenodo.12755061

Published Date: 17-July-2024

Abstract: Health problem are common with pregnancy but differs by trimester in order to address some of this pregnancy the study was conducted to determine the common pregnancy related health problems among pregnant women in Awka South L.G.A. Anambra State. The research design was a cross sectional research design. The population of the study was 1022 pregnant women, the sample of the study was 105 pregnant women, and accidental sampling technique was used to determine the respondents. The instrument for data collection was a questionnaire titled common pregnancy related health problems of pregnant women questionnaire validation was done by three experts the reliability of the instrument was determined using kuder-richardson (KR-20). Data was analyzed using frequency and percentage scores. The result of the study showed differ common pregnancy related health problems for different trimesters in pregnancy. Based on the findings, recommendation was made; since various health problems most occur during pregnancy there is need for continuous health education during antenatal to help the women cope with various health challenges during pregnancy and also help them overcome it.

Keywords: (Common Pregnancy Related Health Problems, Pregnancy, Pregnant Women).

# 1. INTRODUCTION

Pregnancy is the term used to describe the period in which a fetus develops inside a woman's womb or uterus. Pregnancy usually lasts about 40 weeks, or just over 9 months, as measured from the last menstrual period to delivery. Health care providers refer to three segments of pregnancy, called trimesters (Office on Women's Health, 2010).

The weeks are grouped into three trimesters; during the first trimester the body of the woman undergoes many changes. Hormonal changes affect almost every organ system in the body. These changes can trigger symptoms even in the very first weeks of pregnancy. The monthly period stopping is a clear sign that you are pregnant; as the body changes, the woman might need to make changes to her daily routine, such as going to bed earlier or eating frequent, small meals.

Fortunately, most of these discomforts will go away as your pregnancy progresses. And some women might not feel any discomfort at all; most women find the second trimester of pregnancy easier than the first. But it is just as important to stay informed about your pregnancy during these months. One might notice that symptoms like nausea and fatigue are going away. But other new, more noticeable changes to the body are now happening. The abdomen will expand as the baby continues to grow. Before this trimester is over, one will feel the baby beginning to move. According to Huffman (2023), pregnancy is a process and series of changes that take place in a woman's organs and tissues as a result of a developing fetus. The entire process from fertilization to birth takes an average of 266–270 days, or about nine months. Outward early

Vol. 12, Issue 1, pp: (59-64), Month: April 2024 - September 2024, Available at: www.researchpublish.com

indications of pregnancy are missed menstrual periods, morning nausea, and fullness and tenderness of the breasts; but the positive and certain signs of gestation are the sounds of the fetal heartbeat, which are audible with a stethoscope between the 16th and the 20th week of pregnancy; ultrasound images of the growing fetus, which can be observed throughout pregnancy; and fetal movements, which usually occur by the 18th to the 20th week of pregnancy. According Centers for Disease Control and prevention (2023), complications of pregnancy which include some of common pregnancy illness in pregnancy are physical and mental conditions that affect the health of the pregnant or postpartum person, their baby, or both. Physical and mental conditions that can lead to complications may start before, during, or after pregnancy. It is very important for anyone who may become pregnant to get health care before, during, and after pregnancy to lower the risk of pregnancy complications. Most pregnancies progress without incident. But approximately 8 percent of all pregnancies involve complications that, if left untreated, may harm the mother or the baby. While some complications relate to health problems that existed before pregnancy, others occur unexpectedly and are unavoidable. Common complaints during pregnancy; morning sickness, constipation, pain management during pregnancy, skin changes and rashes, swollen ankles, feet and fingers, teeth and gums, varicose veins, vaginal discharge (indirect government service, 2023). Most sufferers will feel nauseous, but may not be sick, while other women find they are not able to keep any food down. Every pregnancy and birth is unique. Addressing inequalities that affect health outcomes, especially sexual and reproductive health and rights and gender, is fundamental to ensuring all women have access to respectful and high-quality maternity care (WHO, 2023).

The United Nations Sustainable Development Goals (SDGs) recognize that ensuring individual health and promoting well-being is important for all people, regardless of age. Maternal health, a key part of SDG 3, is listed as its first target (World Health Organization, 2016). Recently, substantial progress has been made in reducing maternal deaths worldwide, with a 38% decline in the global maternal mortality ratio (MMR) from 2000 to 2017 (Trends in maternal mortality, 2017). However, maternal deaths remain alarmingly high globally; nearly 810 women die every day from preventable causes related to pregnancy or childbirth (Alkema L, Chou D, Hogan D, Zhang S, Moller A-B, Gemmill A, et al. ,2015) though this number differs greatly between regions. According to the World Health Organization (WHO), 94% of all maternal deaths occur in low-resource settings such as those in African countries, which reported approximately 69% (202 700) of the estimated global maternal deaths (295 000) in 2017 (He, Abdureyim, He, Ma, Huang, Zhang, Qi, Hee, Tang, 2022); thus, Africa was categorized as having an extremely high MMR (defined as more than 1000 maternal deaths per 100 000 live births). Advanced maternal age is associated with a decrease in egg quality. This means that as your age goes up, your egg quality goes down. "Older" eggs are more likely to cause chromosomal anomalies.

A lot of these chromosomal anomalies are what healthcare providers screen for in the first trimester. Another reason there are more complications after 35 is that your chances of developing most chronic medical conditions increase as you age. Your body simply responds to these conditions differently once you are older. These chronic medical conditions can affect pregnancy and delivery. For example, even a non-pregnant person is more likely to have high blood pressure at 35 than at 25 (My Cleveland Clinic, 2023).

Although, health care providers, governments and non-governmental Organizations have tried their best in providing education opportunities for these group of women through the media, workshops and seminar and even through the antenatal units in the hospital still the occurrence of pregnancy related illness still remains high and thereby increasing the prevalence of abnormalities and still birth during delivery. It is because of this health problem that this study designed to determine common pregnancy related health problems among pregnant women in Awka south L.GA. of Anambra State.

## **Purpose of the Study**

The purpose of the study was to determine Common pregnancy related health problems among pregnant women in Awka south L.GA. of Anambra State Nigeria. Specifically, the study determined

- 1. common pregnancy related health problems in the first trimester among pregnant women in Awka south L.GA. of Anambra State.
- 2. common pregnancy related health problems in the second trimester among pregnant women in Awka south L.GA. of Anambra State.
- 3. common pregnancy related health problems in the third trimester among pregnant women in Awka south L.GA. of Anambra State.

Vol. 12, Issue 1, pp: (59-64), Month: April 2024 - September 2024, Available at: www.researchpublish.com

### **Research Questions**

The following research questions guided the study;

- 1. What are the common pregnancy related health problems in the first trimester among pregnant women in Awka south L.G.A. of Anambra State?
- 2. What are the common pregnancy related health problems in the second trimester among pregnant women in Awka south L.G.A. of Anambra State?
- 3. What are the common pregnancy related health problems in the third trimester among pregnant women in Awka south L.G.A. of Anambra State?

### 2. METHODS

The design of the study was a cross-sectional research design. The area of the study was Awka south Local Government Area of Anambra state. The population of the study consisted of 1022 pregnant women attending antenatal clinic at primary health care centers in Awka south L.G.A both public and private schools (ministry of Health Anambra State, Awka 2020); The sample of the study was 104 pregnant women attending antenatal clinic at primary health care centers used for the study. The two health care centers where the women were gotten were selected through simple random sampling from the in five health care centers in Awka south local Government of Anambra State. Accident sampling technique would be used to select the women who answered the questionnaire. The instrument for data collection was a questionnaire on Common pregnancy related health problems among pregnant women Questionnaire (CPRHPPWQ). Kudder- Richardson (kr-20) internal consistency measure was used to establish the reliability of the study the co-efficient of reliability was 0.76, 0.56 and 0.61; it was high therefore was considered high and adequate for the study. The data was analyzed used SPSS version 25. The research questions were analyzed using frequency counts and percentage responses.

### 3. RESULTS AND DISCUSSION

**Research Question 1:** What are the common pregnancy related health problems in the first trimester among pregnant women in Awka south L.G.A. of Anambra State?

Table 1: Percentage Responses of pregnant women on the common pregnancy related Health Problems in first trimester. N=105

S/N	Item statements	YES	%	NO	%
1	High blood pressure	15	14.3	90	85.7
2	Gestational Diabetes	55	52.4	50	47.6
3	Infections	43	40.9	62	59.1
4	Preeclampsia	40	38.1	65	61.9
5	Preterm labour	12	11.4	93	88.6
6	Depression	85	80.9	20	19.1
7	Anxiety	93	88.6	12	11.4
8	Miscarriage	71	67.6	34	32.4
9	Still birth	0	0	105	100
10	Vomiting	98	93.3	7	6.7
11	Iron deficiency anemia	70	66.7	35	33.3
12	Obesity	21	20	85	80.9
13	Frequent urination	90	85.7	15	14.3
14	Bleeding	97	92.4	8	7.6
15	Breast tenderness	99	94.3	6	5.7
16	Abdominal pain	105	100	0	0

**YES= 88.8%** while **NO =11.1%** 

Table 1 showed that in the first trimester 88.0% of the women suffers from all the pregnancy related illness listed on the table above such as breast tenderness (94.3%), bleeding (92.4%), anxiety (88.6%), miscarriage (67.6%), depression (80.9%), vomiting (93.3%), abdominal pain (100%) and frequent urination (85.7%).

**Research Question 2:** What are the common pregnancy related health problems in the second trimester among pregnant women in Awka south L.G.A. of Anambra State?

Vol. 12, Issue 1, pp: (59-64), Month: April 2024 - September 2024, Available at: www.researchpublish.com

Table 2: Percentage Responses of pregnant women on the common pregnancy related Health Problems in second trimester. N=105

S/N	Item of on causes of common pregnancy related health problems	Yes	%	No	%
1	High blood pressure	55	52.4	50	47.6
2	Gestational Diabetes	55	52.4	50	47.6
3	Infections	105	100	0	0
4	Preeclampsia	102	97.1	3	2.9
5	Preterm labour	99	94.3	6	5.7
6	Depression	85	80.9	20	19.1
7	Anxiety	92	87.6	13	12.4
8	Miscarriage	45	42.9	60	57.1
9	Still birth	0	0	105	100
10	Vomiting	73	69.5	32	30.5
11	Iron deficiency anemia	56	53.3	49	46.7
12	Obesity	21	20	84	80
13	Morning sickness	85	80.9	20	19.1
14	Breast tenderness	99	94.3	6	5.7
15	Bleeding	92	87.6	13	12.4

**YES= 86.7% While NO= 13.3%** 

Table 2 showed that 86.7% of the women answered yes that suffered from all the pregnancy related health problem as listed in the table above such as; infections (100%), preeclampsia (97.1%), preterm labour (94.3%), anxiety (87.6%), vomiting (69.5%), iron deficiency anemia (53.3%), morning sickness (80.9%) breast tenderness (94.3%) and bleeding (87.6%).

**Research Question 3:** What are the common pregnancy related health problems in the third trimester among pregnant women in Awka south L.G.A. of Anambra State?

Table 3: Percentage Responses of pregnant women on the common pregnancy related Health Problems in third trimester. N=105

S/N	Item on common pregnancy related health problems	Yes	%	No	%
1	High blood pressure	88	83.8	17	16.1
2	Gestational Diabetes	102	97.1	3	2.9
3	Infections	81	77.1	24	22.9
4	Preeclampsia	98	93.3	7	6.7
5	Preterm labour	105	100	0	0
6	Depression	98	93.3	7	6.7
7	Anxiety	98	93.3	7	6.7
8	Miscarriage	21	20	84	80
9	Still birth	71	67.6	34	32.4
10	Vomiting	47	44.8	58	55.2
11	Iron deficiency anemia	66	62.9	39	37.1
12	Obesity	47	44.8	58	55.2
13	Premature rupture of membrane (PROM)	99	94.3	6	5.7
14	Placenta previa	64	60.9	41	39.1
15	Intrauterine growth restriction	100	95.2	5	4.8
16	Insomnia	102	97.1	3	2.9
17	Breast pain	105	100	0	0
18	Back and hip pain	105	100	0	0

YES=83.3% While NO=16.7%

Vol. 12, Issue 1, pp: (59-64), Month: April 2024 - September 2024, Available at: www.researchpublish.com

Table 3 showed that the 83.3% of the women answered yes haven suffered all the pregnancy related health problems listed on the table above such as; high blood pressure (83.8%), gestational diabetes (77.1%), infections (77.1%), preeclampsia (93.3%), preterm labour (100%), depression (93.3%), anxiety (93.3%), still birth (67.6%), iron deficiency anemia (62.9%), PROM (94.3%), placenta previa (60.9%), intrauterine growth restriction(95.2%), insomnia (97.1%), breast pain(100%) and back and hip pain(100%).

# 4. DISCUSSION OF FINDINGS

# Common pregnancy related health problems in the first trimester among pregnant women.

The findings in research question one showed that in the first trimester majority of the women suffers from breast tenderness, bleeding, anxiety, miscarriage, depression, vomiting, abdominal pain and frequent urination all these health problems experienced by this group of women might be because of their pregnancy is at the early stage with that, they are prone to having health problem like bleeding most times the pregnant woman might not even know they are pregnant at that stage. The sudden body adjustment could lead to breast tenderness, anxiety and abdominal pain.

### Common pregnancy related health problems in the second trimester among pregnant women.

The findings of research question two showed that the women suffered from mostly infections, preeclampsia, preterm labour, anxiety, vomiting, iron deficiency anemia, morning sickness, breast tenderness and bleeding. At this stage, the women are at the second to the last stage of their pregnancy if not careful might enter into serious complications. Disease and deficiencies might occur because the mothers' body is working to accommodate for her nutritional needs and that of her child. These deficiencies could also lead to anemia and sometimes morning sickness. The second stage of their pregnancy for some women could look like the first trimester so some of the health problem seen at the first trimester could also occur in the second trimester that is why one could see health problems like breast tenderness and bleeding. The study is supported by the findings of Lassi, Mansoor, Salam, et al. (2014).

# Common pregnancy related health problems in the third trimester among pregnant women.

Findings in research question 3 showed that the women suffered mostly from high blood pressure, infections, preeclampsia, preterm labour, depression, anxiety, still birth, iron deficiency anemia, PROM, placenta previa, intrauterine growth restriction, insomnia, breast pain and back and hip pain. At this stage also the foetus has fully developed and it is preparing to be born; a lot of complications and medical problems will set in to either help the pregnancy reach its full term or retard the pregnancy. Some of the health problem could occur because of the stage of pregnancy sickness like blood pressure, preeclampsia, preterm labour, placenta previa, intrauterine growth restriction, insomnia, breast pain and back and hip pain. Pretem labour could occur because of the readies of the baby and also at that stage the baby has fully developed. Still birth could also occur at this stage also because when the women do not manage the pregnancy related health problems the unborn foetus could die. Insomnia could occur also because of the discomfort experience due to the size of the baby and its readiness to be born; the woman would find it difficult to sleep most of the time. Back and hip pain would be experienced more often than in the other stages of pregnancy because of the frequent foetus move and proper position for birth.

# 5. CONCLUSION

Based on the findings, the following conclusions were made;

Pregnancy related health problems are common among pregnant women regardless of their different trimester. The first trimester majority of the women suffer from breast tenderness, bleeding, anxiety, miscarriage, depression, vomiting, abdominal pain and frequent urination and this may be as a result of their early stage pregnant woman body adjustment may necessitate some of these health issues and if the woman do not have the knowledge of the signs and symptoms of pregnancy might know she is pregnant and might lead to majority of these health problems.

The women suffered from mostly infections, preeclampsia, preterm labour, anxiety, vomiting, iron deficiency anemia, morning sickness, breast tenderness and bleeding in the second trimester all these might be as a result of the stage of pregnant as the woman is between middle stage and delivery; the foetus most time is almost developed and big in size causing discomfort for the foetus and the mother. The women suffered mostly from high blood pressure, gestational diabetes, infections, preeclampsia, preterm labour, depression, anxiety, still birth, iron deficiency anemia, PROM, placenta previa, intrauterine growth restriction, insomnia, breast pain and back and hip pain in the third trimester this is the last stage and final stage in which the baby could be born at any time. It comes with a whole lot of discomfort the placenta could

Vol. 12, Issue 1, pp: (59-64), Month: April 2024 - September 2024, Available at: www.researchpublish.com

present itself first which is very dangerous and could lead to cesarean section, the weight of the baby could result to hip and back pain cause some dislocation even after birth. Finally all the stages of pregnancy have a related health problem so the women should look out for them and look for way to avoid or minimize them from occurring.

### 6. RECOMMENDATIONS

Based on the findings, the following recommendations were made;

- 1. Since various health problems most occur during pregnancy there is need for continuous health education during antenatal to help the women cope with various health challenges during pregnancy and also help them overcome it.
- 2. Husbands need to support their wives during this period because these health problems vary for different women.
- 3. Women on their own should always follow the instructions given to them by healthcare providers and also seek out for more information to help them cope with their challenges.
- 4. There is need for healthcare providers to provide women with essential medications like routine drugs to help calm and easy some of this pains while women in return should also frequently adhere to their routine medications.

### REFERENCES

- [1] Alkema L, Chou D, Hogan D, Zhang S, Moller A-B, Gemmill A, et al. (2015). Global, regional, and national levels and trends in maternal mortality between 1990 and 2015, with scenario-based projections to 2030: a systematic analysis by the UN Maternal Mortality Estimation Inter-Agency Group. *Lancet*. 2016;387:462-74. 10.1016/S0140-6736(15)00838-7
- [2] Centers for Disease Control and prevention (2023). *Pregnancy Complications*. Cono J, Cragan https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pregnancy-complications.html
- [3] He Q, Abdureyim M, He Z, Ma X, Huang M, Zhang T, Qi X, Hee J, Tang K. (2022). Factors associated with age-specific maternal health-seeking behaviours among women: A Multiple Indicator Cluster Survey-based study in 10 African countries. *J Glob Health*. 2022 Nov 8;12:04095. doi: 10.7189/jogh.12.04095. PMID: 36342813; PMCID: PMC9639747.
- [4] Huffman, John W.(2023). "pregnancy". *Encyclopedia Britannica*, 13 Oct. 2023, https://www.britannica.com/science/pregnancy. Accessed 17 October 2023
- [5] My ClevelandClinic (2023). *Advanced Maternal Age*. https://my.clevelandclinic.org/health/diseases/22438-advanced-maternal-age
- [6] Office on Women's Health. (2010). *Stages of pregnancy*. Retrieved May 20, 2016, from https://www.nichd.nih.gov/health/topics/pregnancy/conditioninfo#f1
- [7] Ouedraogo, M., Kurji, J., Abebe, L. *et al.* (2019). Utilization of key preventive measures for pregnancy complications and malaria among women in Jimma Zone, Ethiopia. *BMC Public Health* **19**, 1443 (2019). https://doi.org/ 10.1186/s12889-019-7727-8 guidance/committee-opinion/articles/2013/11/definition-of-term-pregnancy external link
- [8] World Health Organization (2023). *Maternal health*. https://www.who.int/health-topics/maternal-health#tab=tab\_1
- [9] World Health Organization (2016). World Health Statistics 2016: Monitoring Health for the SDGs.
- [10] 2016. Available: https://reliefweb.int/report/world/world-health-statistics-2016-monitoring-health-sdgs?gclid=Cj0K CQiAxoiQBhCRARIsAPsvo-xBUCk5mNSa4CigGHFmlfgUoj6yEGaAT297E7wENGSXD-Xnw92cGSIa AqBHEALw\_wcB. Accessed.